

FRANCISCAN CARE/REHABILITATION CENTER

2915 NORTH MEADE STREET

APPLETON 54911 Phone: (920) 831-8700

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? Yes

Number of Beds Set Up and Staffed (12/31/03): 192

Total Licensed Bed Capacity (12/31/03): 200

Number of Residents on 12/31/03: 177

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 181

Nonprofit Church/Corporation

Skilled

No

Yes

Yes

181

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		21.5	
Supp. Home Care-Personal Care	No					1 - 4 Years		31.6	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.6	Under 65	2.8	More Than 4 Years		23.2	
Day Services	No	Mental Illness (Org./Psy)	15.3	65 - 74	10.2			----	
Respite Care	Yes	Mental Illness (Other)	0.6	75 - 84	33.3			76.3	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	46.3	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	7.3	Full-Time Equivalent			
Congregate Meals	No	Cancer	3.4		----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	6.2		100.0	(12/31/03)			
Other Meals	No	Cardiovascular	27.1	65 & Over	97.2	-----			
Transportation	No	Cerebrovascular	11.9		-----	RNs		10.8	
Referral Service	No	Diabetes	2.3	Gender	%	LPNs		5.7	
Other Services	Yes	Respiratory	10.7		-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	22.0	Male	18.1	Aides, & Orderlies			
Mentally Ill	No		----	Female	81.9				
Provide Day Programming for			100.0		----				
Developmentally Disabled	No				100.0				

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care			Managed Care					
				Per Diem (\$)			Per Diem (\$)			Per Diem (\$)			Per Diem (\$)			Per Diem (\$)			Per Diem (\$)	Total Resi- dents	% Of All
Level of Care	No.	%		No.	%		No.	%		No.	%		No.	%		No.	%				
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Skilled Care	13	100.0	363	118	97.5	120	0	0.0	0	42	100.0	157	0	0.0	0	1	100.0	369	174	98.3	
Intermediate	---	---	---	3	2.5	99	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	1.7	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	13	100.0		121	100.0		0	0.0		42	100.0		0	0.0		1	100.0		177	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	13.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	2.9	Bathing	15.3	50.3	34.5	177
Other Nursing Homes	2.1	Dressing	15.3	50.3	34.5	177
Acute Care Hospitals	81.5	Transferring	26.0	49.7	24.3	177
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	26.0	49.7	24.3	177
Rehabilitation Hospitals	0.0	Eating	76.3	13.0	10.7	177
Other Locations	0.5	*****				
Total Number of Admissions	378	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	5.1	Receiving Respiratory Care		13.6
Private Home/No Home Health	42.0	Occ/Freq. Incontinent of Bladder	46.3	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	12.1	Occ/Freq. Incontinent of Bowel	29.9	Receiving Suctioning		0.6
Other Nursing Homes	3.4			Receiving Ostomy Care		1.1
Acute Care Hospitals	8.7	Mobility		Receiving Tube Feeding		2.3
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	23.7	Receiving Mechanically Altered Diets		26.6
Rehabilitation Hospitals	0.0					
Other Locations	8.4	Skin Care		Other Resident Characteristics		
Deaths	25.3	With Pressure Sores	6.2	Have Advance Directives		81.4
Total Number of Discharges		With Rashes	8.5	Medications		
(Including Deaths)	379			Receiving Psychoactive Drugs		38.4

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities					

	This Facility	Other Hospital-Based Facilities	All Facilities		
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	90.5	90.1	1.00	87.4	1.04
Current Residents from In-County	85.9	83.8	1.03	76.7	1.12
Admissions from In-County, Still Residing	19.0	14.2	1.35	19.6	0.97
Admissions/Average Daily Census	208.8	229.5	0.91	141.3	1.48
Discharges/Average Daily Census	209.4	229.2	0.91	142.5	1.47
Discharges To Private Residence/Average Daily Census	113.3	124.8	0.91	61.6	1.84
Residents Receiving Skilled Care	98.3	92.5	1.06	88.1	1.12
Residents Aged 65 and Older	97.2	91.8	1.06	87.8	1.11
Title 19 (Medicaid) Funded Residents	68.4	64.4	1.06	65.9	1.04
Private Pay Funded Residents	23.7	22.4	1.06	21.0	1.13
Developmentally Disabled Residents	0.6	1.2	0.48	6.5	0.09
Mentally Ill Residents	15.8	32.9	0.48	33.6	0.47
General Medical Service Residents	22.0	22.9	0.96	20.6	1.07
Impaired ADL (Mean)*	47.1	48.6	0.97	49.4	0.95
Psychological Problems	38.4	55.4	0.69	57.4	0.67
Nursing Care Required (Mean)*	7.3	7.0	1.05	7.3	1.00